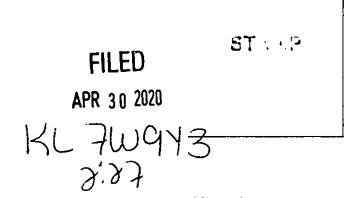
State of Rhode Island and Providence Plantations Department of State - Business Services Division						
Articles of Organization DOMESTIC Limited Liability Company		STP				
→ Filing Fee: \$150.00		··· • •				
Pursuant to the provisions of RIGL <u>7-16</u> , the following Articles of Orga the limited liability company to be organized hereby:	R.I. DE BUS					
1. The name of the limited liability company is:		30 SV				
PJY CONSULTING LLC	PH 2					
2. The name and address of the initial resident agent/office in Rhode	,TE 27					
Agent Name Patricia J Young						
Street Address (<u>NOT</u> a P.O. Box) 260 Beavertail Road, P.O. Box 287						
City/Town Jamestown	State RHODE ISLAND	Zip Code 02835				
3. Under the terms of these Articles of Organization and any written of the limited liability company is intended to be treated for purposes of						
partnership or						
a corporation or						
disregarded as an entity separate from its member(s)						
4. The address of the principal office of the limited liability company, if it is determined at the time of organization:						
Street Address 260 Beavertail Road, P.O. Box 287						
City/Town Jamestown	State Rhode Island	Zip Code 02835				
 The limited liability company has the purpose of engaging in any la until dissolved or terminated in accordance with RIGL <u>7-16</u>, unless a Section 6 of these Articles of Organization. 						

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov



6. Additional provisions, if any, no of Organization, including, but no company is formed, and any othe	ot limited to, any limitat	ion of	the purpose(s) or di	uration for v	which the limited liability	
7. The Limited Liability Company	/ is to be managed by:		Cr	neck this do	x to indicate attachment	
You MUST check one box:			··· -			
Its member(s) (If you have	checked this box, skip	to Se	ction 8. Do not fill or	ut the chart	below.)	
One (1) or more manager(s of Organization, state the na) at the time	e of the filing of these Articles	
MANAGER	ADDRESS					
			<u></u>			
			,, ·			
8. Date when these Articles of O	rganization will be effe	ctive:	CHECK ONE BOX	ONLY		
Date received (Upon filing)						
Later effective date (Date must be no more than 90 days from the date of filing)						
Under penalty of perjury, I decla					ation, including any	
accompanying attachments, and that all statements contained herein are true and correct. Name of Authorized Person Address						
		60 Beavertail Road, P.O. Box 287				
City/Town			State		Zip Code	
Jamestown			Rhode Island		02835	
Signature of Authorized Person			Date			
SIGN DOCUMENT HERE			April 27, 2020			



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island

and Providence Plantations, hereby certify that this document, duly executed in

accordance with the provisions of Title 7 of the General Laws of Rhode Island, as

amended, has been filed in this office on this day:

April 30, 2020 02:27 PM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

